



## Permanency for Children Returning Children Home Safely And Permanently Practice Bulletin September 2008



### Safe and Timely Reunification Requires a Foundation of Good Practice<sup>1</sup>

This practice bulletin focuses on: Returning children home safely and permanently once they have been placed out of the home as a response to safety issues.

DHS Case reading data shows that of 278 children reviewed between May and July 2008, **91%** had been reunified or were on track to reunify within 12 months. The child data profile produced by our DC federal partners indicates an average foster care placement of 8 months to reunification.

Successful reunification impacts a number of outcomes and indicators for the CFSR; whether the child returns to foster care [item 5]; whether you have selected the correct goal and established it timely [item 7], and whether timely permanency is achieved for the child [item 8]. In addition, one of the national standards, [permanency composite 1] depends on timely and permanent reunification.

But successful reunification is also dependent on a number of other outcomes and indicators being achieved. For example, reunification is more likely when a child is placed in their neighborhood or community [item 11], where the parents can visit frequently [item 13] and where services to the child and family can be directed at maintaining the relationship between the child in care and their parent [item 16]. When we clearly understand the issues impacting the parental capacity and develop a plan of services to mitigate or remedy those issues [item 17] with the ownership and involvement of

the parents [item 18] the likelihood of permanent reunification is strongly enhanced. Achievement of these practices hinge on the ability of the caseworker to visit the child and parents frequently [Item 19 & 20], to assess safety and progress toward achieving the family change needed to assure the children will be placed back home permanently. In addition, assessing conditions that indicate the right time to reunify, and planning the transition home is critical to its success. Assuring that the supports and services are in place to foster reunification is critical.

Well-being needs being assessed and met is also critical to reunification. An assessment of underlying needs is important to identify what supports and services to address any special needs of the child need to be in place for a successful reunification. Parental capacity to respond to any special needs of a child must be improved, developed, or supported so that the child remains home permanently. For example, if a child has mental/behavioral health [Item 23] issues, after care services, respite, family therapy, or other services may be needed to maintain the child safely at home.

#### Expectations:

Successful reunification is directly related to safety, permanency, and well-being.

**Permanency Outcome 1:** Children have permanency and stability in their living situations.

- ☐ Foster care re-entries (Item 5)
- ☐ **Permanency goal for child (Item 7)**
- ☐ **Reunification (Item 8)**
- ☐ **Timeliness and permanency of reunifications (Permanency Composite 1)**

<sup>1</sup> Family Reunification: What the Evidence Shows, Child Welfare Information Gateway, [www.childwelfare.gov](http://www.childwelfare.gov)



## Permanency for Children Returning Children Home Safely And Permanently Practice Bulletin September 2008

**Permanency Outcome 2:** The continuity of family relationships and connections is preserved for children.

- ☐ Proximity of foster care placement (Item 11)
- ☐ Visiting with parents and siblings in foster care (Item 13)
- ☐ Relationship of child in care with parents (Item 16)

**Well-being Outcome 1:**

- ☐ Assessing and meeting the needs of the child, parent and foster parent. [Item 17]
- ☐ Case Planning with the child and parent, building parental capacity. [Item 18]
- ☐ Caseworker visits to monitor progress in meeting the case plan goals for children and parents. [Item 19 & 20]
- ☐ Assuring that the educational needs of the child are being met and advocating for a successful school program for the child. [Item 21]
- ☐ Assessing and addressing the medical and mental health needs of the child. [Item 22 & 23]

The expectation is that an appropriate permanency goal is selected, that matches the child's needs and circumstances, at each point in the life of the case. When it does not appear that a goal of reunification can realistically occur within 6 months, a concurrent goal should always be established and activities to support both goals should be worked on to assure that the child has viable permanency options at 12 months.

There are specific timeframes established by the CFSR for achieving timely permanence:

Reunification, guardianship, or permanent placement with relatives	12 months from foster care entry
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Make concerted effort to achieve reunification within 6 months of a child's entry into foster care. When the prognosis for reunification within 6 months is unlikely, engage the father and mother in developing a realistic alternative goal. Concurrent planning requires actively implementing strategies for both permanency goals established with the family.

### Research<sup>2</sup>:

Permanency for children is critical to positive child and family outcomes and to our success in helping families. Research indicates that a child must have a relationship with at least one adult who is nurturing, protective, and fosters trust and security over time to become a psychologically healthy human being. We also know that children need consistency in having their needs met over time to develop, learn and grow. Connection with an adult who is devoted to and unconditionally loves a child is key to helping a child overcome the trauma of abuse and neglect. Stability of relationships is important because when the day to day consistency of caregiving is lost, it directly impacts a child's ability to trust, love and cope. Repeated moves of a child compound the adverse consequences of abuse and neglect. Safety and permanency in children's lives are a prerequisite of growth, development, and successful well-being.

"Family Reunification: What the Evidence Shows" an article in the Child Welfare Information Gateway, identifies the following practices support timely reunification:

- ☐ Successful reunification must be systematically considered and planned for from the earliest possible point in the life of the case. Timeframes for reunification must be based on the individual needs of the children and families, not on arbitrary timeframes.
- ☐ Engage father, mother, and child through: recognition of their strengths, establishing open, honest communication, and developing trust. Promote shared decision making - look for every opportunity for the family to define their own needs and make decisions about how to address them. Mutually established goals are critical to successful reunification. Non-custodial parents must be engaged initially to prevent delays in permanency and enhance the child's connections and family resources.
- ☐ A comprehensive assessment that identifies underlying issues, coupled with a clear identification of what behavioral change needs to occur to assure safety of the children is critical to successful reunification.
- ☐ Understanding the child's and family's circumstances, environment, and potential is required to identify each family's unique needs, determine the extent of the risk

<sup>2</sup> "Achieving Permanence for Children in the Child Welfare System: Pioneering Possibilities Amidst Daunting Challenges." Lorrie L. Lutz



## Permanency for Children Returning Children Home Safely And Permanently Practice Bulletin September 2008

to the child, and to develop an intervention plan. Clear expectations of family change keeps families and those trying to help the family on the same path.

- Targeted services that meet the individualized needs of children and families are key to achieving family reunification and ensuring children's safety. Services should be practical and comprehensive. The most effective treatment involves all members of the family and addresses not only parenting skills, but also parent-child interaction and a range of parental life competencies, such as communication, problem solving and anger control.
- Keep the foster care placement stable through meeting the needs of the foster parents. Promote a good relationship between the foster parents and the family; a good relationship between the parents and foster parents reduces the stress of divided loyalties and can ease transition home for the child by providing the parents with ongoing informal supports.
- Schedule visits between the parents and the foster child early in the placement and often to promote the parent's relationship with the child. Use those visits to help the father and mother develop their parenting, nurturing, and disciplining skills. Provide instruction and reinforcement in performance and completion of mutually agreed upon activities. Frequent visitation is linked to both the likelihood of reunification and post reunification stability.
- Both the frequency and nature of the caseworker's contact with the family are important to family reunification. Use regular visits with the child, father, and mother to monitor effectiveness of interventions and measure progress toward the necessary family change identified in the assessment process.
- Of course, research shows that continuity of workers is also related to timely permanency. Good case notes and a transition plan between workers to assure continuity of goals and strategies is required if there is a worker change.
- Good transition planning that includes establishing lasting informal supports and crisis or relapse planning is critical to prevent reentry into foster care. Post reunification services contribute to positive outcomes.

### **Why is achieving reunification such a challenge?**

Reunification must be built on a foundation of good practice. Permanency is directly related to key practices and numerous case decisions over the life of the case. Lack of quality or care in **any** of the following areas of practice can result in significant delays in reunification:

- Comprehensive assessment of children and their needs;
- Family team understanding of the child's needs and viable permanency options;
- Family team collaborative teamwork, communication, and monitoring/tracking of progress toward achieving permanency;
- Child and family engagement and shared decision making;
- Case planning, timely permanency decisions, and effectiveness of strategies to achieve permanency;
- Timely court reviews and meaningful permanency hearings;
- Maintaining a stable, nurturing, and permanent placement;
- Transition planning for safe case closure; and
- Ongoing informal or community supports to maintain family change and/or provide ongoing support to meet the needs of the child.

The expectations are very high and the required timeframes are very short to complete the sequence of tasks required for reunification. There needs to be a prolonged focus on family change for reunification at the first meeting with the family and a sense of urgency in providing the services or intervention that will promote change. Without a sense of urgency, completion of the necessary decisions and the multitude of tasks needed for reunification cannot be timely.

### **How do we know when it is safe to return a child home?**

The goal is to return the child at the earliest point where the child can successfully remain home safely and permanently. Determining when to return the child safely must be based on the same safety constructs that were used in determining that the child could not remain home safely. An evaluation of the threats of maltreatment, vulnerability of the child, and the protective capacities of the family is required with particular focus on the parental capacity and the conditions that affected the parental capacity. A specific and realistic safety plan can assure the child's safety while there is continued work on the underlying issues that have impacted parental capacity and the vulnerability of





## Permanency for Children Returning Children Home Safely And Permanently Practice Bulletin September 2008

the child. There is a distinct difference between the criteria for returning the child home safely and permanently and criteria for safe case closure. A reunification decision is based on safety where there may continue to be risk factors addressed in the case planning process. There is the expectation that we will continue to provide ongoing assessment and services to mitigate risk and address underlying issues related to the threat of maltreatment. Case closure criteria are based on assuring that repeat maltreatment does not occur and that the family has demonstrated the stability necessary for success without further protective intervention. Some of the issues to consider when assuring permanent return to the parental home include:

- ☐ Are the parents free from intimidation and present no safety threats to self or other?
- ☐ Have the parents demonstrated the ability to address the basic needs of the child and keep the home environment and daily functioning conditionally stable?
- ☐ Does the parent demonstrate adequate care giving capacity on a reliable daily basis commensurate with that required to provide the children with appropriate nurturance, guidance, protection, care and supervisions?
  - ◆ Is the family home free from hazards?
  - ◆ Are children adequately supervised?
  - ◆ If there are older youth in the home, do they have age-appropriate expectations, curfews, and consequences?
  - ◆ Are the children in school on a daily basis and doing their homework?
  - ◆ Do parents use praise, show affection and emotional support and use age-appropriate discipline with the child?
  - ◆ How effectively do the parents exercise unified and effective authority; proper boundaries?
- ☐ Are protective provisions in place and working?
- ☐ Have the parents demonstrated behavioral changes to keep children safe; e.g. maintaining sobriety, following safety or relapse plans?
- ☐ Are formal or informal support systems being developed that can provide for the needs of the family?
- ☐ If the child has special medical, emotional, behavioral, or developmental needs, does the parent have and use any special knowledge, skills, and supports that may be required to meet the children's needs? If the parent

has extraordinary demands, what supports are available to offset or manage the care burden?

- ☐ Are the underlying reasons or life challenges improving or being mitigated:
  - ◆ Limited cognitive abilities
  - ◆ Substance abuse impairment or addiction
  - ◆ Unlawful behavior patterns and incarceration
  - ◆ Adverse effects of poverty
  - ◆ Cultural or language barriers adversely affecting caregiving ability or childrearing inconsistent with normative expectations
  - ◆ Serious mental illness
  - ◆ Domestic violence
  - ◆ Serious illness or disabling physical condition
  - ◆ Extraordinary demands placed on the caregiver
  - ◆ Immaturity of a parent lacking skills and judgment for child care
  - ◆ Life disruption and dislocation
  - ◆ Grief and loss issues

In addition, you want to assure that protective factors are being promoted. Click on the links below to reference the Child Welfare Information Gateway protective factors:<sup>3</sup>

- [Nurturing and attachment](#)
- [Knowledge of parenting and of child and youth development](#)
- [Parental resilience](#)
- [Social connections](#)
- [Concrete supports for parents](#)

Visits between the parents and children should be used strategically to build parental capacity and offer an opportunity for mentoring, coaching, and demonstration of learned parental skills and abilities. Increasing frequency and duration of visits with the parent in the home allows better evaluation of the improvement of parental capacity and the behavioral change for the parents. It also provides a transition to the return of full parental responsibility. Trial home visits should be structured with behaviorally specific expectations and a solid safety and crisis plan.



<sup>3</sup> <http://www.childwelfare.gov/can/factors/protective.cfm>